

CERTIFICATE OF SERVICE

I, Gini L. Downing (name), certify that service of this summons and a copy of the complaint was made February 4, 2022 (date) by:

☒ Mail service: Regular, first class United States mail, postage fully pre-paid, addressed to:
Ashgrove Marketing Agency LLC
30475 South Wixom Road, Suite 100A
Wixom, MI 48393

Ashgrove Marketing Agency LLC
c/o Kelli Monahan, President
30475 South Wixom Road, Suite 100A
Wixom, MI 48393

☒ Certified Mail Service: By sending the process by certified mail addressed to the following entities/officers/registered agents of the defendant at:

Ashgrove Marketing Agency, LLC
Attn: Kelli Monahan, President
30475 South Wixom Road, Ste. 100A
Wixom, MI 48393

Michael Indenbaum, R/A for
Ashgrove Marketing Agency, LLC
660 Woodward Avenue, Ste. 2290
Detroit, MI 48226

I further certify that I am, and at all times during the service of process was, not less than 18 years of age and not a party to the matter concerning which service of process was made.

Under penalty of perjury, I declare that the foregoing is true and correct.

Date February 4, 2022 Signature /s/ Gini L. Downing

Print Name: Gini L. Downing
Pachulski Stang Ziehl & Jones LLP
10100 Santa Monica Blvd.
13th Floor
Business Address: Los Angeles, CA 90067

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> <i>KM</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Ashgrove Marketing Agency, LLC Attn: Kelli Monahan, President 30475 South Wixon Road, Ste. 100A Wixom, MI 48393</p>		<p>B. Received by (Printed Name) <i>KM</i></p>	<p>C. Date of Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7017 2400 0000 3936 9733</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

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<p>1. Article Addressed to:</p> <p>Michael Indenbaum, R/A for Ashgrove Marketing Agency, LLC 660 Woodward Avenue, Ste. 2290 Detroit, MI 48226</p>		<p>B. Received by (Printed Name) <i>COVID-19</i></p>	<p>C. Date of Delivery <i>2/8/22</i></p>
<p>2. Article Number (Transfer from service label)</p> <p>7017 2400 0000 3936 9726</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	